

Best Available Copy

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | <i>J</i> | 71531  | 11-21-07 |
| O.I.P.E. CLASSIFIER |          |        |          |
| FORMALITY REVIEW    | <i>J</i> | 71531  | 12-22-07 |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here